FAX TRANSMISSION OCT 2 7 2
DATE: October 27, 2005
PTO IDENTIFIER: Application Number 10/811,196-Conf. #2937 Patent Number
Inventor: Barry N. Gellman
MESSAGE TO: US Patent and Trademark Office
FAX NUMBER: (571) 273-8300
FROM: EDWARDS & ANGELL, LLP
Robert J. Tosti
PHONE: (617) 517-5584
Attorney Dkt. #: 62881C1(71589)
PAGES (Including Cover Sheet): 4
CONTENTS:  Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (1 page)  Statement Under 37 CFR 3.73(b) (1 page)  Certificate of Transmission (1 page)
If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (617) 517-5584 and send the original transmission to us by return mail at the address below.
This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.
EDWARDS & ANGELL, LLP P.O. Box 55874, Boston, Massachusetts 02205 Telephone: (617) 439-4444 Facsimile: (617) 439-4170
$\cdot$

PTO/SB/97 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
U. S. Patent and Tradumark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 10/811,196

Attorney Docket No.: 62881C1(71589)

Certificate of Transmiss	ion under 37 CFR 1.8
I hereby certify that this correspondence is be States Patent and Trademark Office.	ing facsimile transmitted to the United
on October 27, 2005 Date	
Lynn E. M.	2112
Signatu	e
Lynn Man	
Typed or printed name of per	son signing Certificate
	(617) 439-4444
Registration Number, if applicable	Telephone Number
Note: Each paper must have its own certificate of identify each submitted paper.	f transmission, or this certificate must

Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (1 page) Statement Under 37 CFR 3.73(b) (1 page)

00-00570053

## RECEIVED CENTRAL FAX CENTER

OCT 2 7 2005

Undor	rthe Paperwo	rk Reduction Act of 1995, no persons are		upproved for use through 11/30/2005. OMB 0631-003 Edemark Office; U.S. DEPARTMENT OF COMMERCY Information unless it displays a verid OMS control mumbe			
		Application Number	10/811,196-Conf. #2937				
REVOCATI		TION OF POWER OF	Filing Date	March 26, 2004			
1 ,	ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS		First Named Inventor	Barry N. Gellman			
1			Art Unit	3738			
		WEST SUBSTITUTE AND RESC	Examiner Name	T. Sweet			
L			Attorney Docket Number	62881C1(71589)			
I hereby revoke all previous powers of attorney given in the above-identified application.							
I PAI	Power of A	Attorney is submitted herewill	•	· · · · · · · · · · · · · · · · · · ·			
OR		The state of the s	•				
	ereby aon	oint the practitioners associa	had with the Cuatemer No.	nhom			
			en with the cristothet Mil	nber: 21874			
X Please change the correspondence address for the above identified application to							
Please change the correspondence address for the above-identified application to:							
The address associated with Customer Number: 21874							
OR		Tenuron a vice					
Firm or EDWARDS & ANGELL, LLP Robert J. Tosti							
	P.O. Box						
City	Boston	Boston					
Country I	US	Stel	□ MA	Zip 02205			
Talephone (	<del>`                                    </del>	-4444	F	sx (617) 439-4170			
l am th	ne:						
П Арр	licanl/Inve	entor.					
X Ass	ignee of re Icment un	acord of the entire intorest. S der 37 CFR 3.73(b) is enclose	ee 37 CFR 3,71, ed. <i>(Form PTO/SB/</i> 96)				
		SIGNATURE OF A	pplicant or Assignoo of	Record			
Signature ////							
Name Jeff Z. Mann - Assistant Secretary							
Date 10/21/05 Telephone 5/8/652-5965							
NOTE: Signatures of all the inventors or assignces of moord of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
*Total of 1 toms are submitted.							

०३-०२५५ (६)

			PTO/SE/96 (00 for use through 07/31/2008. OMB 0651-C Office; U.S. DEPARTMENT OF COMME
		respond to a collection of informatio	n unleas it displays a volid CMB control num
	STATEMENT UN	IDER 37 CFR 3.73(b)	
Applicant/Patent Owner: Barry	N. Gellman		
Application No./Patent No.:	10/811,196	Filed/Issue Date:	March 26, 2004
Entitled: MALE URETHRAL S	TENT DEVICE		
Boston Scientific Scimed, Inc. (FKA Scin	nod Life Sytems,	Con	poration
(Name of Assigned)	<u> </u>	ypo of Assigners, e.g., corporation, par	mership, university, government agency, etc.)
states that it is:			
1. x the assignee of the enti	re right, title, and Inte	rest; or	
2. an assignee of less than	n the entire right, title	and interest.	
The extent (by percenta	ge) of its ownership i	merest is %	
in the patent application/patent ide	ntified above by virtu	e of either:	
			Padalana Thanas
was recorded in the Unite	d States Palent and "	rk application/patent identil Trademark Office at Reel	fled above. The assignment
Frame0882	. Or for which a conv	thereof is attached	<u> </u>
OR The state of th	,	aloroor is allegrad.	
<ol> <li>A chain of title from the invassionee as shown below.</li> </ol>	/entor(s), of the pater	nt application/patent identif	ied above, to the current
1. From:		To:	•
The document was n	ecorded in the United	States Patent and Traden	nark Office at
Reel	, Frame	, or for which a copy	thereof is attached.
2. From:		Τα	
The document was re	corded in the United	States Patent and Tradem	nark Office at
Reel	, Frame	, or for which a copy	thereof is attached.
3. From:		To:	
The document was re	corded in the United	States Patent and Tradem	ark Office at
		, or for which a copy	
		listed on a supplemental a	
Copies of assignments or o	ther documents in th	a chain of title are attached	
INUIE: A separate copy (	.e a true copy of the	i nach tromoniese leninan	mant/e\\ mumb ba
submitted to Assignment D recorded in the records of t	ivišion in accordance	with 37 CED Dag 2 If the	assignment is to be
he undersigned (whose little is supp			
11/1/11	الما المارية (١٩٠٥) المارية المستسمس		assignee.
Signatu	<u></u>	<u> </u>	41/0
TODA 7 11	·-	4.01	Date
Printed or Type	777/	<u>50//</u>	602-5455
Assistant	Sonata in	•	Telephone Number
		<del>1</del> —	
1108	~	,	